

**COMMONWEALTH OF VIRGINIA  
DEPARTMENT OF TRANSPORTATION  
VENDOR PAYMENT COMPLIANCE REPORT  
(FEDERALLY FUNDED PROJECTS)**

(Vendor defined as: Subcontractor, Consultant, Supplier, Manufacturer, Hauler)

Pages(s) \_\_\_\_\_ of \_\_\_\_\_

(1a) Report No. \_\_\_\_\_  
(1b) Report Period 20 \_\_\_\_\_ Oct. - Dec ☐ Jan - Mar ☐ Apr - Jun ☐ Jul - Sept ☐

(2a) Federally Funded ☐ Federally Funded Local Govt. ☐

(2b) Contractor/Subcontractor \_\_\_\_\_

(2c) Contract ID No. \_\_\_\_\_

(2d) Date of Execution \_\_\_\_\_

(2e) District \_\_\_\_\_

(3) Vendor Name	(4) Tax I.D.	(5) Certification Type – Must Specify DBE, SWaM, or Non-DBE/SWaM	(6) Payments to Vendors	
			(6a) This Quarter	(6b) To Date

**All amounts paid to all Vendors are to be reported and submitted according to the quarterly submittal schedule. See Instructions.**

I/WE certify under penalty of law that the information provided herein is accurate, current, and complete to the best of my/our Knowledge.

Signature and Title of Company Official \_\_\_\_\_ Date \_\_\_\_\_  
Print Name and Phone Number of Individual \_\_\_\_\_  
Completing Report \_\_\_\_\_

**VIRGINIA DEPARTMENT OF TRANSPORTATION  
INSTRUCTIONS FOR  
VENDOR PAYMENT COMPLIANCE REPORT C-63**

The Prime Contractor is required to submit a Vendor Payment Compliance Report and document all payments made to all vendors during the designated quarterly reporting period. All amounts paid to vendors are subject to monitoring and enforcement mechanisms. It is the responsibility of the prime contractor to provide evidence of vendor payments in response to monitoring and enforcement compliance reviews.

The instructions below correspond to each item on the report. Please follow the instructions.

- 1a. **Report No.**  
Indicate the number of the report you are sending in sequence. For example: If this is the second report you are submitting for the contract, enter Report No. 2.
- 1b. **Report Period**  
Indicate the reporting period based on the Reporting Schedule listed in these instructions.
- 2a. **Funding Source**  
Indicate the primary funding source: Federally Funded, Federally Funded Local Government .
- 2b. **Contractor/Subcontractor**  
Enter your company's name
- 2c. **Contract I.D. No.**  
Enter the contract identification number assigned to your project.
- 2d. **Date of Execution**  
Enter the date the contract was executed.
- 2e. **District**  
Enter the VDOT District where the project under contract is located.
3. **Vendor Name**  
Enter all subcontractors utilized.
4. **Tax I.D. No.**  
Indicate the Federal Employer Identification No.
5. **Certification Type**  
Specify the certification type of each Vendor:  
DBE – Disadvantaged Business Enterprise  
SWaM – Small, Woman, and Minority-Owned Business Enterprise  
Non-DBE/SWaM – Subcontractor is not certified as a DBE or SWaM business in Virginia
6. **Payments to Vendors**  
Dollar amount paid to Vendors during contract.
- 6a. **Payments to Vendors this Qtr.**  
Dollar amount of payment made to Vendors in reporting quarter.

6b. **Payments to Vendors to Date**

Total dollar amount paid to Vendors since contract execution.

Effective (date), All Form C-63s for each reporting period shall be submitted in an electronic format to the District Civil Rights Office in each District by the following dates of each calendar year.

**REPORTING SCHEDULE**

<b>Reporting Period</b>	<b>Date Due To Responsible VDOT Charge</b>
July 1 – September 30	Five (5) business days after the reporting period
October 1 – December 31	Five (5) business days after the reporting period
January 1 – March 31	Five (5) business days after the reporting period
April 1 – June 30	Five (5) business days after the reporting period

If the submittal date falls on a weekend/holiday, the forms shall be submitted to the District Civil Rights Office on the following business day.